

1044 U.S. PTO
06/07/01

6-8-01

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Terrence P. Everson & Bryan Anderson
Docket: 00163.1410US01
Title: Compositions and Methods for Removing Silver-Oxide

CERTIFICATE UNDER 37 CFR 1.10

'Express Mail' mailing label number: EL 814837626 US

Date of Deposit: June 7, 2001

I hereby certify that this paper or fee is being deposited with the United States Postal Service 'Express Mail Post Office To Addressee' service under 37 CFR 1.10 and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

By: _____
Name: Lisa A. Samuels

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09/876294

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BOX PATENT APPLICATION
Commissioner for Patents
Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

- ☒ Transmittal sheet, in duplicate, containing Certificate under 37 CFR 1.10.
- ☒ Utility Patent Application: Spec. 13 pgs; 20 claims; Abstract 1 pgs.
The fee has been calculated as shown below in the "Claims as Filed" table.
- ☐ Design Patent Application: Spec. _____ pgs.
- ☐ _____ sheets of formal drawings
- ☐ Certified copy of a _____ application, Serial No. _____, filed _____, the right of priority of which is claimed under 35 U.S.C. 119
- ☐ Small entity status is claimed pursuant to 37 CFR 1.27
- ☐ Nonpublication Request under 37 CFR 1.213(a)
- ☒ A signed Combined Declaration and Power of Attorney
- ☐ An unsigned Combined Declaration and Power of Attorney
- ☒ Assignment of the invention to Ecolab, Inc., Recordation Form Cover Sheet ✓
- ☒ A check in the amount of \$710.00 to cover the Filing Fee
- ☒ A check for \$40.00 to cover the Assignment Recording Fee.
- ☐ Computer readable form of _____. Applicants state that the paper copy form of the _____ section of the present application, and the computer readable form submitted herewith, are the same.
- ☐ Other: _____
- ☒ Return postcard

CLAIMS AS FILED

Number of Claims Filed		In Excess of:		Number Extra		Rate		Fee
Basic Filing Fee								\$710.00
Total Claims	20	-	20	=	0	x	18.00	= \$0.00
Independent Claims	3	-	3	=	0	x	80.00	= \$0.00
MULTIPLE DEPENDENT CLAIM FEE								\$0.00
TOTAL FILING FEE								\$710.00

Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

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